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APPLICANTS

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** CONTINUING DATA *****

Yes AB

** FOREIGN APPLICATIONS *****
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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>AB</i>				

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TITLE

Data compression and reconstruction methods and apparatuses for hard copy device

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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